DATENT	APPLICATION FI	EE DETERMIN	IATION RECORD
PAIENI	APPLICATION FI	EE DE L'ENIVIII	IALION NECOND

Effective October 1, 2000

Application or Docket Number

126-133

CLAIMS AS FILED - PART I (Column 1) (C				(Colur	nn 2)	SMALL ENTITY TYPE			OR	OTHER THAN		
TOTAL CLAIMS		22					RATE FEE			RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASI	FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			12 minus 20=		*	2	X\$	9=	18	OR	X\$18=	
INDEPENDENT CLAIMS 4 m				nus 3 =	*	/	X4	0=	40	OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT						. 🗆	+13	35=		OR	+270=	
* If the difference in column 1 is less than zero, enter "0" in column					olumn 2	TO	ΓAL		OR	TOTAL		
CLAIMS AS AMENDED - PART II							OTHER THA SMALL ENTITY OR SMALL ENTIT					
		(Column 1)	155		mn 2)	(Column 3)	SM	ALL	ENTITY	OR L	SMALL	
ENT A		REMAINING AFTER AMENDMENT		NUM PREVI	IBER OUSLY FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	#	Minus	**		=	X\$	9=		OR	X\$18=	
AME	Independent	*	Minus	***	T CL AIM	=	X4	0=		OR	X80=	
<u> </u>	FIRST PRESE	NTATION OF M	OLTIPLE DEP	ENDEN	CLAIN		+13	35=		OR	+270=	
· · · · · · · · · · · · · · · · · · ·								OTAL		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	ımn 2)	(Column 3)	ADDIT	. FEE		J	ADDIT. I'EE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIG NUM PREV	HEST MBER IOUSLY FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	X\$ 9= X40=			OR	X\$18=	
AME	Independent		Minus	***		=				OR	X80=	·
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIM		. +1	35=		OR	+270=	
	•						ADDI	OTAL		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colu	ımn 2)	(Column 3)	, ADDI			_	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER HOUSLY D FOR	PRESENT	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NOW	Total	*	Minus	••		=	X\$	9=		OR	X\$18=	ï
AME	Independent	*	Minus	***	IT OL AUG	=	X4	0=		OR	X80=	
	FIRST PRESE	NTATION OF M	IULTIPLE DE	PENDE	II CLAIM		+13	35=		OR	+270=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL OR TOTAL												
	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											